¥									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000									09/771733				
CLAIMS AS FILED - PART I (Column 1) (Column 2)									NTITY	OR	OTHER	• • • • • •	
TOTAL CLAIMS			45					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			4 minus 20=		. 25			X\$ 9=		OR	X\$18=	450	
INDEPENDENT CLAIMS			/ minus 3 =					X40=	·	OR	X80=	SO	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=	1		+270 =	00	
• If	the difference	in column 1 is	ess than zero, enter "0" in column 2			olumn 2	' l	TOTAL	-	OR	TOTAL	19 65	
CLAIMS AS AMENDED - PART II								IOIAL	<u> </u>	JON	OTHER	THAN	
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENOMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ş	Total	. 20	Minus ,	4	15	=		X\$ 9=		OR	X\$18=		
ME	Independent	• 1	Minus	•••	4	=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF MI	JLTIPLE	DEPENDENT	CLAIM			+135=		OR	+270=		
51-05								TOTAL		00	TOTAL		
7/-05 (Column 1) (Column 2) (Column 3)								ADDIT. FEE	:L	JOH.	ADDIT. FEE		
AMENDMENT B	er en	CLAIMS - REMAINING	10.00	HIGH	EST	PRESENT	ז ו		ADDI-	ا. ا	•	-ADDI-	
		AFTER AMENOMENT		PREVIO PAID	USLY	EXTRA		RATE	TIOÑAL FEE		RATE	TIONAL FEE	
	Total	. 70	Minus	- 4	3	* _		X\$ 9=		OR	X\$18=		
¥	independent	* TATION OF MI	Minus	nependent	CLAIM	- /	$\ \cdot \ $	X40=		OR	X80=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+270=		
		• 5				•		TOTAL	- 1	OR	TOTAL		
(Column 1) (Column 2) (Column 3)											ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		= '		X\$ 9=	T	OR	X\$18=		
	Independent	•	Minus	•••		•		X40=			X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	-		
* If the entry in column 1 is less than the entry in column 2, write "O' in column 3.											+270=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE OR "If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in or											ADDIT. FEE		
	The "Highest Nurr	ber Previously Pa	id For (Tol	tal or Indepand	ent) is the	highest númb	er fot	and in the a	ppropriate bo	x in co	dumn 1.		

FORM PTO-875 (Rev. 8/00)

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